



Approved for use through 10/31/2002. OMB 06551-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)  
44500

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to "Assistant Commissioner for Patents, Washington D.C. 20231" on 10-30-02

In re Application of Crabtree et al. #18

Application Number 09/593,360 Filed 6/14/2000

Signature Valerie E. Savoy

For Fire Fighting Nozzle and Method Including Pressure Regulation, Chemical and Eduction Features (CIP)

Typed or printed Name Valerie E. Savoy  
Exp. Mail Label #EVO25983279US

Group Art Unit 3752 Examiner C. Kim

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 320.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ 160.00

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge any fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1753 (0110SS-44500). I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is ~~enclosed~~ not believed needed but consider this one if one is needed.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

attorney or agent of record.

attorney or agent acting under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

Sue Z. Shaper  
Signature

11/01/2002 HANDED1 00000078 09593360  
01 FC:2401 160.00 DP

Sue Z. Shaper  
Typed or printed name

10/30/02  
Date

NOTE: Signatures of all th inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\* Total of 1 \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231



10/31/02

AFS  
3100

Please use a plus sign (+) inside this box →

PTO/SB/21 (08-00)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	<b>Application Number</b>	09/593,360
	<b>Filing Date</b>	Jun 14, 2000
	<b>First Named Inventor</b>	Crabtree, Dennis W.
	<b>Group Art Unit</b>	3752
	<b>Examiner Name</b>	C. Kim
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b> 44500

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Check (\$160.00) Return Receipt Postcard
Remarks		
<p style="text-align: center;"><i>Consider this a request for extension of time - small entity - if one is needed.</i></p>		

RECEIVED

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		NOV 07 2002
Firm or Individual name	Sue Z. Shaper	TECHNOLOGY CENTER R3700
Signature	<i>Sue Shaper</i>	
Date	10/31/02	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class <i>Express</i> mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: <u>10-30-02</u>		
Type or printed name	Valerie Savoy	Exp. Mail Label # <u>EV0259832945</u>
Signature	<i>Valerie Savoy</i>	Date <u>10-30-02</u>

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant Claims small entity status See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$160.00)**

### Complete if Known

Application Number	09/593,360
Filing Date	6/14/2000
First Named Inventor	Crabtree, et al.
Examiner Name	C. Kim
Group Art Unit	3752
Attorney Docket No.	44500

### METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account

Deposit Account Number: 50-1753

Deposit Account Name: \_\_\_\_\_

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	160.00
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.129(a)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

**SUBTOTAL (1) (\$)**

#### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	-20**=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	-3**=		X		=	
Multiple Dependent					=	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	**Reissue independent claims over original patent	
110	18	210	9	***Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2) (\$)**

\*\* or number previously paid, if greater, For Reissues, see above

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$) 160.00**

RECEIVED  
NOV 07 2002  
TECHNOLOGY CENTER R3700

### SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Sue Z. Shaper	Registration No. (Attorney/Agent)	31663	Telephone	713 550 5710
Signature	<i>Sue Z. Shaper</i>			Date	10/30/02

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